From: Donna Hand

**Sent:** Friday, March 24, 2017 11:11 AM **To:** DOL Energy Advisory Board Information **Subject:** Medical evidence and opinions

- 1. AMA Guide to Evaluation of Permanent Impairment...... for psychiatric conditions such as dementia, anxiety, depression the class of the impairment should be stated. This is not considered in the impairment evaluation of activities of daily living; sexual activity is also not considered which according to the AMA should be; With Chronic Beryllium disease, the liver and skeleton should also be considered along with the other accepted consequential illnesses known to be connected with CBD and DEEOIC stated in the procedural Manuel Chapt 2-1000, 11 before the latest date. See the treatment suite for CBD.
- 2. CMC reports... Objective medical findings to support a medical diagnosis means information gained through direct observation and testing of the patient, applying objective or standardized methods. Medical opinions MUST be founded on reasonable medical probability, not mere possibility or speculation. HOWEVER, under the EEOICP the regulations lists the medical evidence required, and the statute only requires a "probability" of less than 50%, "at LEAST as likely as not". The physicians MUST stay within the perimeter of the law, even when that perimeter is broad. The DEEOIC cannot be more restrictive than the law as per Lucero case, Brigman case, Barrie Case, and the Administrative Procedure Act.
- 3. Preexisting dormant non-disabling conditions is defined under Workman Compensation programs as a condition which is capable of arousal into disabling reality by **work activities** or injury. The condition MUST be a departure from the normal state of health. (aggravating; contributing to) This does not mean work /labor categories but the working tasks and the work areas., "arose out of "employment which the law requires and the US Supreme Court has defined.

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